
State: Arkansas **Filing Company:** Metropolitan Life Insurance Company
TOI/Sub-TOI: A02.1G Group Annuities - Deferred Non-Variable and Variable/A02.1G.001 Fixed Premium
Product Name: Group Annuities
Project Name/Number: Form G.4437 /NY12-137 SA

Filing at a Glance

Company: Metropolitan Life Insurance Company
Product Name: Group Annuities
State: Arkansas
TOI: A02.1G Group Annuities - Deferred Non-Variable and Variable
Sub-TOI: A02.1G.001 Fixed Premium
Filing Type: Form
Date Submitted: 09/11/2012
SERFF Tr Num: META-128670804
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: NY12-137 SA (LW)

Implementation: On Approval
Date Requested:
Author(s): Sandra Bennett, Ruth Rivera, Linda Williams
Reviewer(s): Linda Bird (primary)
Disposition Date: 09/14/2012
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

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General Information

Project Name: Form G.4437 Status of Filing in Domicile: Pending
Project Number: NY12-137 SA Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Small and Large
Group Market Type: Employer Overall Rate Impact:
Filing Status Changed: 09/14/2012
State Status Changed: 09/14/2012 Deemer Date:
Created By: Ruth Rivera Submitted By: Linda Williams
Corresponding Filing Tracking Number:

Filing Description:

Re: Form No. G.4437 Group Fixed Annuity Certificate

Enclosed for your review and approval is copy of Certificate Form G.4437.

This Certificate Form G.4437 will be issued on behalf of a Joint and Survivor Annuity with a "pop up" feature whereby the Annuitant's monthly annuity will increase if the Survivor Annuitant dies before the Annuitant. The bracketed portions of the Certificate Form are variable to reflect the specific Annuitant, Survivor Annuitant, dates of birth, annuity commencement date, and the monthly annuity payment amounts. MetLife intends to issue the form upon the election of this annuity form under single premium group annuity contracts or group annuity contracts issued for defined benefit plans.

Please advise us whether this form meets the requirements for approval by your Department. If you have any additional questions or comments, please feel free to contact me at (212) 578-3031.

Regards,

Helen Walsh

Company and Contact

Filing Contact Information

Shana Anselme, Senior Analyst sanselme@metlife.com
1095 Avenue of the Americas, 212-578-7029 [Phone] 7029 [Ext]
MSC 39.534 212-578-2124 [FAX]
New York, NY 10036

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Filing Company Information

Metropolitan Life Insurance Company
MetLife
1095 Avenue of the Americas
New York, NY 10036-6796
(212) 578-2211 ext. [Phone]

CoCode: 65978
Group Code: 241
Group Name:
FEIN Number: 13-5581829

State of Domicile: New York
Company Type: Life
State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50.00 Per Form Submitted for Approval.
Per Company: No

Company	Amount	Date Processed	Transaction #
Metropolitan Life Insurance Company	\$50.00	09/11/2012	62576362

State:	Arkansas	Filing Company:	Metropolitan Life Insurance Company
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	09/14/2012	09/14/2012

State:	Arkansas	Filing Company:	Metropolitan Life Insurance Company
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Disposition

Disposition Date: 09/14/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Certificate Form		Yes

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Form Schedule

Lead Form Number: Form G.4437							
Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/ Action Specific Data	Readability Score	Attachments
1		Form G.4437	CER	Certificate Form	Initial:	50.000	G.4437 Final.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



Metropolitan Life Insurance Company
A Stock Company Incorporated in New York State
200 Park Avenue---New York, New York 10166

Metropolitan Life Insurance Company (herein called MetLife) certifies that, under and subject to the terms of the Contract, the Annuitant is entitled to receive the annuity described in this certificate.

Contractholder: [ABC Company]	
Group Annuity Contract No.: [123456]	Certificate No.: [xxx-xx-0123]
Annuitant: [John Doe]	Date of Birth of Annuitant: [10/10/1949]
Survivor Annuitant: [Jane Doe]	Date of Birth of Survivor Annuitant: [08/02/1950]
Annuity Commencement Date: [11/01/2012]	Monthly Annuity Payment to Annuitant – Amount A: [\$300.00]
Monthly Annuity Payment to Annuitant – Amount B: [\$400.00]	Monthly Annuity Payment to Survivor Annuitant after Annuitant's Death – Amount C: [\$150.00]

Payment of Annuity: MetLife will make annuity payments monthly from the Annuity Commencement Date, if the Annuitant and Survivor Annuitant are then living, to the date of the last payment before the Annuitant's death or, if later, to the date of the last payment before the Survivor Annuitant's death. Annuity payments due during the Annuitant's lifetime will be made to the Annuitant. Any annuity payments due after the Annuitant's death will be made to the Survivor Annuitant.

Amount of Payment to Annuitant: The amount of each annuity payment to the Annuitant, while both the Annuitant and the Survivor Annuitant are living, will be Amount A. The amount of each annuity payment to the Annuitant, while only the Annuitant is living, will be Amount B. The amount of each annuity payment to the Survivor Annuitant, while only the Survivor Annuitant is living, will be Amount C.

Proof of Living: MetLife may require proof that the Annuitant or the Survivor Annuitant, as the case may be, is living on the date on which any annuity payment is to be made to such person. If proof is requested, no payment will be made until the proof has been received by MetLife.

Misstatements: If the Annuitant's or the Survivor Annuitant's age or sex or any other relevant fact has been misstated, MetLife will have the right to make an adjustment in the annuity in accordance with the Contract.

Limitation of Assignment: The annuity is nonassignable and will be exempt from the claims of creditors to the maximum extent permitted by law.

Facility of Payment: MetLife will only pay the Annuitant or Survivor Annuitant who is entitled to any annuity benefit payment under this Contract unless MetLife has been given proof that someone or an entity is legally entitled to act on behalf of, or receive payment for, the Annuitant or Survivor Annuitant.

Entire Contract: The Contract constitutes the entire agreement between the Contractholder and MetLife solely with respect to the annuity payments owed to each payee under the Contract.

Metropolitan Life Insurance Company

Steven A. Kandarian
Chairman, President and Chief Executive Officer

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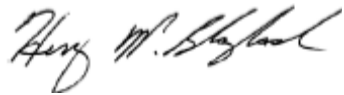
Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification		
Comments:	Attached are the required Certifications.		
Attachment(s):			
ARCERTREG19.pdf			
ARCERTREG19.pdf			

Metropolitan Life Insurance Company
NAIC Company Number: 65978
NAIC Group Number: 826
FEIN: 13-5581829

ARKANSAS CERTIFICATION
Rule and Regulation 19
Unfair Sex Discrimination in the Sale of Insurance

I certify that this submission meets the provisions of Rule and Regulation 19, and all applicable requirements of the Arkansas Department of Insurance.


A handwritten signature in black ink, appearing to read "Henry M. Blaylock". The signature is fluid and cursive, with the first name "Henry" being more prominent.

Henry Blaylock
Assistant Vice President

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Henry Blaylock
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